

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

MAINE DEMOCRATIC STATE COMMITTEE

ADDRESS (number and street) ▼

P.O. Box 5258

16 Winthrop St.

☐ Check if different than previously reported. (ACC)

Augusta

ME

04330

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00179408

3. IS THIS REPORT

☐

NEW (N)

OR

☒

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

☐

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

ME

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Betty Johnson

Signature of Treasurer

Betty Johnson

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

MAINE DEMOCRATIC STATE COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y 10 / 14 / 2010 To: M M / D D / Y Y Y Y Y 11 / 22 / 2010

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2010		11355.10
(b) Cash on Hand at Beginning of Reporting Period.....	321304.90	
(c) Total Receipts (from Line 19)	132832.02	1100293.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	454136.92	1111648.35
7. Total Disbursements (from Line 31)	258646.06	916157.49
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	195490.86	195490.86
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

MAINE DEMOCRATIC STATE COMMITTEE

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
10 14 2010

To:

M M / D D / Y Y Y Y Y
11 22 2010**I. Receipts**
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

46656.98

371473.83

(ii) Unitemized

19401.70

103219.31

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

66058.68

474693.14

(b) Political Party Committees

0.00

15000.00

(c) Other Political Committees

(such as PACs).....

32500.00

79250.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

98558.68

568943.14

12. Transfers From Affiliated/Other

Party Committees.....

17107.59

225659.69

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

4385.88

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

92.61

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

232950.51

(b) Levin Funds (from Schedule H5)

17165.75

68261.42

(c) Total Transfers (add 18(a) and 18(b))..

17165.75

301211.93

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

132832.02

1100293.25

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

115666.27

799081.32

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	3225.79	79674.44
(ii) Non-Federal Share.....	18162.82	312791.65
(b) Other Federal Operating Expenditures	1358.46	62699.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	22747.07	455165.22
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	65.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	65.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	3029.25	12796.14
(ii) "Levin" Share.....	17165.75	72511.42
(b) Federal Election Activity Paid Entirely With Federal Funds	215703.99	375619.71
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	235898.99	460927.27
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	258646.06	916157.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	223317.49	530854.42

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	98558.68	568943.14
34. Total Contribution Refunds (from Line 28(d))	0.00	65.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	98558.68	568878.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	4584.25	142373.57
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	4385.88
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	4584.25	137987.69

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: F3XA

Transaction ID :

This report is being amended to reflect changes noted in the Miscellaneous Text (FEC Form 99) dated 05/09/2012 21:26 regarding the 11/15/2010 payroll that was inadvertently omitted on the originally filed report. -- Please note that the employees that were disclosed on Schedule B supporting Line 21(b) and Schedule H4 Supporting Line 21(a) as payroll spent less than 25% of their time during the period working on Federal Election Activity or activities in connection with a Federal Election. This also includes fringe benefits for those specific employees. - All fundraising and event activity on this report were for the sole benefit of the committee and not attributable to any candidate for federal office. - No transfers from any national committees were used for any activity that meets the definition of exempt activity.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Dorothy Ahlgren

Mailing Address PO Box 104

City

Kittery Point

State

ME

Zip Code

03905

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

650.00

Date of Receipt

10 / 22 / 2010

Transaction ID : SA11AI.9381

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Dorothy Ahlgren

Mailing Address PO Box 104

City

Kittery Point

State

ME

Zip Code

03905

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

10 / 28 / 2010

Transaction ID : SA11AI.9749

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Jonathan Albrecht

Mailing Address 170 Common Rd

City

Dixfield

State

ME

Zip Code

04224

FEC ID number of contributing
federal political committee.

C

Name of Employer

Saunders Manufacturing

Occupation

Senior Systems Analyst

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

10 / 18 / 2010

Transaction ID : SA11AI.9206

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Margaret Allen

Mailing Address 20 Forest Lake Way

City

Madison

State

ME

Zip Code

04950

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Student

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

690.00

Date of Receipt

10 / 22 / 2010

Transaction ID : SA11AI.9398

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Thomas Allen

Mailing Address 17 Fairmount St

City

Portland

State

ME

Zip Code

04103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Association of American Publis

Occupation

President & CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

10 / 21 / 2010

Transaction ID : SA11AI.9269

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Nancy C Anderson

Mailing Address 47 Sturdivant Road

City

Cumberland Foresid

State

ME

Zip Code

04110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Facilitator

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

8750.00

Date of Receipt

11 / 01 / 2010

Transaction ID : SA11AI.9870

Amount of Each Receipt this Period

4000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4510.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. John Anton

Mailing Address 63 Spruce Street

City

Portland

State

ME

Zip Code

04102

FEC ID number of contributing
federal political committee.

C

Name of Employer

NNEHIF

Occupation

Affordable Housing Finance

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2010

Transaction ID : SA11AI.9372

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Arletta Ashe

Mailing Address 10 Prout Pl

City

Cape Elizabeth

State

ME

Zip Code

04107

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2010

Transaction ID : SA11AI.9104

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Philip Bailey

Mailing Address 86 Jellison Cove Road

City

Hancock

State

ME

Zip Code

04640

FEC ID number of contributing
federal political committee.

C

Name of Employer

MSEA-SEIU

Occupation

Field Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2010

Transaction ID : SA11AI.9062

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

760.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Margaret Baillie

Mailing Address 214 Norway Rd

City

Bangor

State

ME

Zip Code

04401

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2010

Transaction ID : SA11AI.9917

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Severin Beliveau

Mailing Address 3 Litchfield Rd

City

Hallowell

State

ME

Zip Code

04347

FEC ID number of contributing
federal political committee.

C

Name of Employer

Preti Flaherty

Occupation

Attorney

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		22		2010

Transaction ID : SA11AI.9513

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Austin Belton

Mailing Address PO Box 3044

City

Nashua

State

NH

Zip Code

03061

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Not employed

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		22		2010

Transaction ID : SA11AI.9422

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

700.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Francis Bemis

Mailing Address 51 Barton St

City	State	Zip Code
Presque Isle	ME	04769

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2010

Transaction ID : SA11AI.9894

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. William Berlinghoff

Mailing Address 104 Court St

City	State	Zip Code
Farmington	ME	04938

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2010

Transaction ID : SA11AI.9070

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. William Berlinghoff

Mailing Address 104 Court St

City	State	Zip Code
Farmington	ME	04938

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2010

Transaction ID : SA11AI.9210

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

250.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. William Berlinghoff

Mailing Address 104 Court St

City State Zip Code
 Farmington ME 04938

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self

Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 28 2010

Transaction ID : SA11AI.9696

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

B. John Bernard

Mailing Address 56 Mildred St

City State Zip Code
 South Portland ME 04106

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

None

Not employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 22 2010

Transaction ID : SA11AI.9351

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

c. John Bernard

Mailing Address 56 Mildred St

City State Zip Code
 South Portland ME 04106

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

None

Not employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 28 2010

Transaction ID : SA11AI.9603

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

140.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. John Bernard

Mailing Address 56 Mildred St

City

South Portland

State

ME

Zip Code

04106

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Not employed

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2010

Transaction ID : SA11AI.9889

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Seth Berry

Mailing Address 1245 River Rd

City

Bowdoinham

State

ME

Zip Code

04008

FEC ID number of contributing
federal political committee.

C

Name of Employer

State of Maine

Occupation

Legislator

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2010

Transaction ID : SA11AI.9096

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. Todd Bezold

Mailing Address 271 Chases Pond Rd

City

York

State

ME

Zip Code

03909

FEC ID number of contributing
federal political committee.

C

Name of Employer

IDEXX

Occupation

Research Scientist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2010

Transaction ID : SA11AI.9780

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

285.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Mary Bonauto

Mailing Address 14 Kenwood St

City

Portland

State

ME

Zip Code

04102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gay & Lesbian Advocates & Defe

Occupation

Attorney

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2010

Transaction ID : SA11AI.9462

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Patricia Bredenberg

Mailing Address 8 Fox Hill Rd

City

Cape Elizabeth

State

ME

Zip Code

04107

FEC ID number of contributing
federal political committee.

C

Name of Employer

SBS Consulting

Occupation

Nurse Practitioner

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2010

Transaction ID : SA11AI.9944

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Karen Byrne

Mailing Address 6 Lithgow Street

City

Winslow

State

ME

Zip Code

04901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Winslow Congregational Church

Occupation

Minister

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2010

Transaction ID : SA11AI.9688

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

575.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Judith Chamberlain

Mailing Address 10 Sea Grass Farm Rd

City

Brunswick

State

ME

Zip Code

04011

FEC ID number of contributing
federal political committee.

C

Name of Employer

Aetna

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2010

Transaction ID : SA11AI.9385

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Sallie Chandler

Mailing Address 3 Chandler Road

City

Lebanon

State

ME

Zip Code

04027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chandler Septic Service

Occupation

President

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2010

Transaction ID : SA11AI.9095

Amount of Each Receipt this Period

12.50

Full Name (Last, First, Middle Initial)

C. Katherine ChappellMailing Address PO Box 920
99 Main Street

City

Kennebunk

State

ME

Zip Code

04043

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Artist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2010

Transaction ID : SA11AI.9117

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

762.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Cathy Coffman

Mailing Address 52 Wildwood Drive

City State Zip Code
 Saco ME 04072

FEC ID number of contributing
federal political committee.

C

Name of Employer

Thornton Academy

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 15 / 2010

Transaction ID : SA11AI.9124

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. James Cogan

Mailing Address 179 Lisbon St

City State Zip Code
 Lewiston ME 04240

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 28 / 2010

Transaction ID : SA11AI.9657

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. James Cogan

Mailing Address 179 Lisbon St

City State Zip Code
 Lewiston ME 04240

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 28 / 2010

Transaction ID : SA11AI.9837

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

425.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 17 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. James Cogan

Mailing Address 179 Lisbon St

City

Lewiston

State

ME

Zip Code

04240

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Psychologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2010

Transaction ID : SA11AI.9928

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Peter Dominski

Mailing Address PO Box 368

City

Cape Neddick

State

MD

Zip Code

03902

FEC ID number of contributing
federal political committee.

C

Name of Employer

CBRE

Occupation

Commercial Real Estate

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2010

Transaction ID : SA11AI.9358

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Benjamin Dudley

Mailing Address 9 Ponce Street

City

Portland

State

ME

Zip Code

04101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Engage Maine

Occupation

Nonprofit Executive Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2010

Transaction ID : SA11AI.9087

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ▶

550.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Michael Eng

Mailing Address 10 Brookwood Dr

City

North Yarmouth

State

ME

Zip Code

04097

FEC ID number of contributing
federal political committee.

C

Name of Employer

self

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2010			

Transaction ID : SA11AI.9609

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Sean Flaherty

Mailing Address PO Box 6998

City

Scarborough

State

ME

Zip Code

04070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Coastal Maine Aquatics

Occupation

Coach

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2010			

Transaction ID : SA11AI.9468

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. Roy Gedat

Mailing Address 111 Main Street

City

Norway

State

ME

Zip Code

04268

FEC ID number of contributing
federal political committee.

C

Name of Employer

self

Occupation

Social Worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2010			

Transaction ID : SA11AI.9602

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

290.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Hendrik Gideonse

Mailing Address 119 Old County Road

City State Zip Code
 Brooklin ME 04616

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 28 / 2010

Transaction ID : SA11AI.9601

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Celia Gilbert

Mailing Address 15 Gray Gardens West

City State Zip Code
 Cambridge MA 02138

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Not employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 21 / 2010

Transaction ID : SA11AI.9294

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Nathan Hall

Mailing Address 505 Newport Dr

City State Zip Code
 Pittsburgh PA 15235

FEC ID number of contributing federal political committee.

C

Name of Employer

Westinghouse Nuclear

Occupation

Operations Training Instructor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 01 / 2010

Transaction ID : SA11AI.9880

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2020.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Thomas Hallett

Mailing Address 15 Vaughan St

City	State	Zip Code
Portland	ME	04102

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Hallett Law Offices, P.A.

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2010

Transaction ID : SA11AI.9370

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Joseph Hanslip

Mailing Address PO Box 191

City	State	Zip Code
Sanford	ME	04073

FEC ID number of contributing
federal political committee.

C

Name of Employer

York County

Occupation

County Commissioner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2010

Transaction ID : SA11AI.9223

Amount of Each Receipt this Period

700.00

Full Name (Last, First, Middle Initial)

C. Corey Hascall

Mailing Address 61 Berkshire Rd

City	State	Zip Code
Portland	ME	04103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Barton & Gingold

Occupation

Communications consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2010

Transaction ID : SA11AI.9051

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

960.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Francis Jackson

Mailing Address 139 Hartley

City State Zip Code
Portland ME 04103

FEC ID number of contributing federal political committee.

C

Name of Employer
Jackson & MacNichol

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2010

Transaction ID : SA11AI.9088

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Shirley Kazon

Mailing Address 5 Wildwood Circle

City State Zip Code
Portland ME 04103

FEC ID number of contributing federal political committee.

C

Name of Employer
None

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2010

Transaction ID : SA11AI.9239

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. David Kendall

Mailing Address 5215 Massachusetts Ave

City State Zip Code
Bethesda MD 20816

FEC ID number of contributing federal political committee.

C

Name of Employer
Williams & Connelly

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 27 / 2010

Transaction ID : SA11AI.9575

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3100.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Michael Kenslea

Mailing Address PO Box 6651

City

Portsmouth

State

NH

Zip Code

03802

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2010			

Transaction ID : SA11AI.9577

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Gilbert Kinney

Mailing Address 19 E 77nd Street

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2010			

Transaction ID : SA11AI.9873

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Rebecca Lambert

Mailing Address 18 Victor Rd

City

Portland

State

ME

Zip Code

04103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greater Portland Council of Gov

Occupation

Planner/Reg Sustainability Coordinator

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2010			

Transaction ID : SA11AI.9902

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1100.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Dorothy Lemessurier

Mailing Address 221 Mt Auburn Street

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2010

Transaction ID : SA11AI.9578

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Rosalind Lewis

Mailing Address 16 Vista Way

City

Mount Desert

State

ME

Zip Code

04660

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2010

Transaction ID : SA11AI.9298

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Jo Ellen Linder

Mailing Address 18 Stagecoach Rd

City

Falmouth

State

ME

Zip Code

04105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Maine Medical Center

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2010

Transaction ID : SA11AI.9521

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

750.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. John March Jr.

Mailing Address PO Box 287

City

Seal Harbor

State

ME

Zip Code

04675

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Trustee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 15 / 2010

Transaction ID : SA11AI.9094

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Edmund McCann

Mailing Address 150 Capisic Street

City

Portland

State

ME

Zip Code

04102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Maine Dept of Labor

Occupation

Dept Commissioner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2010

Transaction ID : SA11AI.9246

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Dale McCormick

Mailing Address 87 Court Street

City

Augusta

State

ME

Zip Code

04330

FEC ID number of contributing
federal political committee.

C

Name of Employer

MaineHousing

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 28 / 2010

Transaction ID : SA11AI.9801

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

260.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Francis McGinty

Mailing Address 44 Newell Ridge Rd

City

Cumberland

State

ME

Zip Code

04021

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2010

Transaction ID : SA11AI.9292

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Brockway McMillan

Mailing Address PO Box 27

City

Sedgwick

State

ME

Zip Code

04676

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2010

Transaction ID : SA11AI.9123

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Bethany Millard

Mailing Address 9 E 88th St

City

New York

State

NY

Zip Code

10128

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2010

Transaction ID : SA11AI.9501

Amount of Each Receipt this Period

10000.00

SUBTOTAL of Receipts This Page (optional)..... ►

10700.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Robert Millard

Mailing Address 9 E 88th St

City
New York

State Zip Code
NY 10128

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lehman Brothers

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2010

Transaction ID : SA11AI.9503

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

B. Marta Morse

Mailing Address 387 Spring Street

City
Portland

State Zip Code
ME 04102

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Not employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2010

Transaction ID : SA11AI.9347

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Marta Morse

Mailing Address 387 Spring Street

City
Portland

State Zip Code
ME 04102

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Not employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2010

Transaction ID : SA11AI.9794

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

10350.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Catherine Newell

Mailing Address PO Box 187

City

Greenwood

State

ME

Zip Code

04255

FEC ID number of contributing
federal political committee.

C

Name of Employer

Maine Adult Education Associat

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2010			

Transaction ID : SA11AI.9887

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. John Newlin

Mailing Address 30 E Coxon Rd

City

Brunswick

State

ME

Zip Code

04011

FEC ID number of contributing
federal political committee.

C

Name of Employer

Maine International Center

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2010			

Transaction ID : SA11AI.9931

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Edward Oelsner

Mailing Address 521 East 84th Street

City

New York

State

NY

Zip Code

10028

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2010			

Transaction ID : SA11AI.9068

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

760.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Edward Oelsner

Mailing Address 521 East 84th Street

City State Zip Code
New York NY 10028

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2010

Transaction ID : SA11AI.9891

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. James OKeefe

Mailing Address 57 Exchange Street Ste 401

City State Zip Code
Portland ME 04101

FEC ID number of contributing
federal political committee.

C

Name of Employer

ILG

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2010

Transaction ID : SA11AI.9686

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

C. Mark Ouellette

Mailing Address 21 Cloverleaf Ln

City State Zip Code
Scarborough ME 04074

FEC ID number of contributing
federal political committee.

C

Name of Employer

State of Maine DECD

Occupation

Dir of Bussiness development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2010

Transaction ID : SA11AI.9685

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1550.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Gregory Payne

Mailing Address 66 Rosemont Ave

City

Portland

State

ME

Zip Code

04103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Avesta Housing

Occupation

Housing Advocate

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2010

Transaction ID : SA11AI.9617

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Martha Phillips

Mailing Address 538 Town Farm Road

City

Oakland

State

ME

Zip Code

04963

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sherman & Sandy

Occupation

Legal Assistant

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2010

Transaction ID : SA11AI.9781

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

C. Michael Popkin

Mailing Address PO Box 21

City

Whitefield

State

ME

Zip Code

04353

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self employed

Occupation

Business

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2010

Transaction ID : SA11AI.9890

Amount of Each Receipt this Period

180.00

SUBTOTAL of Receipts This Page (optional)..... ►

460.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 30 OF 117
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Lisa Prosienski

Mailing Address 161 Congress Street

City	State	Zip Code
Portland	ME	04101

FEC ID number of contributing
federal political committee.

C

Name of Employer

US House of Representatives

Occupation

Chief of Staff

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2010

Transaction ID : SA11AI.9478

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Charles Quintero

Mailing Address 157 Pleasant St

City	State	Zip Code
Richmond	ME	04357

FEC ID number of contributing
federal political committee.

C

Name of Employer

Maine State Senate

Occupation

Cheif of Staff

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2010

Transaction ID : SA11AI.9100

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Barbara Redmond

Mailing Address 65 Dam Road

City	State	Zip Code
Vassalboro	ME	04989

FEC ID number of contributing
federal political committee.

C

Name of Employer

MMaine Secretary of State

Occupation

Chief Deputy Secretary of State

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2010

Transaction ID : SA11AI.9393

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Barbara Redmond

Mailing Address 65 Dam Road

City

Vassalboro

State

ME

Zip Code

04989

FEC ID number of contributing
federal political committee.

C

Name of Employer

MMaine Secretary of State

Occupation

Chief Deputy Secretary of State

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2010

Transaction ID : SA11AI.9833

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Rick Redmond

Mailing Address 171 Congress St Apt 3

City

Portland

State

ME

Zip Code

04101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Maine Democratic Party

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2010

Transaction ID : SA11AI.9113

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Raymond Rhinehart

Mailing Address 1541 8th Street NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Institute of Architec

Occupation

Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2010

Transaction ID : SA11AI.9484

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

360.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. William Rice

Mailing Address PO Box 5222

City

Ellsworth

State

ME

Zip Code

04605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 15 / 2010

Transaction ID : SA11AI.9081

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Judith Ringo

Mailing Address 9 Kingfisher Ct

City

Gorham

State

ME

Zip Code

04038

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Not employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 28 / 2010

Transaction ID : SA11AI.9610

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Andrew Roth-Wells

Mailing Address 81 Williams Road

City

Georgetown

State

ME

Zip Code

04548

FEC ID number of contributing
federal political committee.

C

Name of Employer

House Majority Office

Occupation

Legislative Aide

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

10 / 28 / 2010

Transaction ID : SA11AI.9743

Amount of Each Receipt this Period

80.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

630.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Roger A Roy

Mailing Address 287 Lake Shore Dr

City	State	Zip Code
Madawaska Lake	ME	04783

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Maine

Occupation

Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2010

Transaction ID : SA11AI.9923

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. John Scarcelli

Mailing Address 126 Neal St

City	State	Zip Code
Portland	ME	04102

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2010

Transaction ID : SA11AI.9629

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Marden Seavey

Mailing Address PO Box 120

City	State	Zip Code
Denmark	ME	04022

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2010

Transaction ID : SA11AI.9636

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

360.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Marden Seavey

Mailing Address PO Box 120

City

Denmark

State

ME

Zip Code

04022

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Not Employed

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2010

Transaction ID : SA11AI.9705

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

B. Shipyard Brewing Company

Mailing Address 86 Newbury St

City

Portland

State

ME

Zip Code

04101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

244.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2010

Transaction ID : SA11AI.10008

Amount of Each Receipt this Period

174.48

2010 Muskie Lobster Bake Donation

Full Name (Last, First, Middle Initial)

C. Margo Simmons

Mailing Address 5 Trillium Lane

City

Falmouth

State

ME

Zip Code

04105

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Not employed

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2010

Transaction ID : SA11AI.9400

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

504.48

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Diane Smith

Mailing Address PO Box 11146

City	State	Zip Code
Portland	ME	04104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Congressman Mike Michaud

Occupation

Scheduler

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2010

Transaction ID : SA11AI.9505

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Sharon Sudbay

Mailing Address 108 Monument St

City	State	Zip Code
Portland	ME	04101

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Public Affairs Group

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2010

Transaction ID : SA11AI.9077

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. J. William Thomas

Mailing Address 356 Shore Rd

City	State	Zip Code
Bremen	ME	04551

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2010

Transaction ID : SA11AI.9268

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

1600.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Donato Tramuto

Mailing Address PO Box 1728

City

Ogunquit

State

ME

Zip Code

03907

FEC ID number of contributing
federal political committee.

C

Name of Employer

Physicians Interactive

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

10 / 22 / 2010

Transaction ID : SA11AI.9344

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Bronwen Tudor

Mailing Address 356 Five Islands Rd

City

Georgetown

State

ME

Zip Code

04548

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 15 / 2010

Transaction ID : SA11AI.9078

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

C. Linda Valentino

Mailing Address PO Box 1049

City

Saco

State

ME

Zip Code

04072

FEC ID number of contributing
federal political committee.

C

Name of Employer

Valentino Law Office

Occupation

Paralegal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

11 / 05 / 2010

Transaction ID : SA11AI.9935

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

645.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Ellen Wells

Mailing Address 4 CCIA Road

City

South Bristol

State

ME

Zip Code

04568

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2010

Transaction ID : SA11AI.9384

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Jennifer Wriggins

Mailing Address 14 Kenwood St

City

Portland

State

ME

Zip Code

04102

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Maine

Occupation

Law Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2010

Transaction ID : SA11AI.9463

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

350.00

TOTAL This Period (last page this line number only)..... ►

46656.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Bank of America Corporation PAC

Mailing Address 1100 North King Street

City State Zip Code
Wilmington DE 19884

FEC ID number of contributing
federal political committee.

C C00043489

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 21 / 2010

Transaction ID : SA11C.9276

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. International Association of Fire Fighters

Mailing Address 1750 New York Avenue NW

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee.

C C00029447

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

10 / 22 / 2010

Transaction ID : SA11C.9495

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. International Brotherhood of Electrical Workers

Mailing Address 900 Seventh Street NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C C00027342

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

10 / 22 / 2010

Transaction ID : SA11C.9509

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

11000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. MICHAUD FOR CONGRESS

Mailing Address 213 Lisbon St

City

Lewiston

State

ME

Zip Code

04240

FEC ID number of contributing
federal political committee.

C

C00367821

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2010			

Transaction ID : SA11C.9258

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. MICHAUD FOR CONGRESS

Mailing Address 213 Lisbon St

City

Lewiston

State

ME

Zip Code

04240

FEC ID number of contributing
federal political committee.

C

C00367821

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

6500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2010			

Transaction ID : SA11C.9508

Amount of Each Receipt this Period

6500.00

Full Name (Last, First, Middle Initial)

C. National Education Association Fund for Children & Public Education PAC

Mailing Address 1201 16th Street NW Suite 420

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

C00003251

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2010			

Transaction ID : SA11C.9516

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

16500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. The Nestle Waters North America Inc

Mailing Address 777 West Putnam Avenue

City State Zip Code
Greenwich CT 06836

FEC ID number of contributing
federal political committee.

C C00302943

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

10 / **19** / **2010**

Transaction ID : SA11C.9231

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

5000.00

TOTAL This Period (last page this line number only)..... ►

32500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. ASDC PARTNERSHIP PROGRAM

Mailing Address 430 South Capitol Street

City State Zip Code
Washington DC 20003

FEC ID number of contributing
federal political committee.

C C00402404

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3962.82

Date of Receipt

11 / **15** / **2010**

Transaction ID : SA12.9979

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

B. DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Mailing Address 430 S. CAPITOL STREET S.E.

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228476.37

Date of Receipt

10 / **21** / **2010**

Transaction ID : SA12.9266

Amount of Each Receipt this Period

6887.09

ME State Party Victory Fund

Full Name (Last, First, Middle Initial)

C. DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Mailing Address 430 S. CAPITOL STREET S.E.

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233476.37

Date of Receipt

10 / **28** / **2010**

Transaction ID : SA12.9588

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

13887.09

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMITTEE

Mailing Address 430 S. CAPITOL STREET S.E.

City State Zip Code
 WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236696.87

Date of Receipt

10 / 28 / 2010

Transaction ID : SA12.9589

Amount of Each Receipt this Period

3220.50

ME State Party Victory Fund

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3220.50

17107.59

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 14 Arrow St

City State Zip Code
 Cambridge MA 02138

Purpose of Disbursement
 ActBlue Processing fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 10 15 2010

Transaction ID : SB21B.9112

Amount of Each Disbursement this Period

235.75

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 14 Arrow St

City State Zip Code
 Cambridge MA 02138

Purpose of Disbursement
 ActBlue processing fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 10 22 2010

Transaction ID : SB21B.9485

Amount of Each Disbursement this Period

381.20

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 14 Arrow St

City State Zip Code
 Cambridge MA 02138

Purpose of Disbursement
 Act Blue Processing fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 10 28 2010

Transaction ID : SB21B.9597

Amount of Each Disbursement this Period

418.46

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1035.41

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. A-Copi Imaging Systems

Mailing Address PO Box 2240

City Augusta State ME Zip Code 04338

Purpose of Disbursement
Copier Rental

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 05 / 2010

Transaction ID : SB30B.9959

Amount of Each Disbursement this Period

244.20

Full Name (Last, First, Middle Initial)

B. Advantage Payroll Services

Mailing Address PO Box 1330

City Auburn State ME Zip Code 04211

Purpose of Disbursement
Processing fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 28 / 2010

Transaction ID : SB30B.9860

Amount of Each Disbursement this Period

104.87

Full Name (Last, First, Middle Initial)

C. Advantage Payroll Services

Mailing Address PO Box 1330

City Auburn State ME Zip Code 04211

Purpose of Disbursement
Payroll Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 15 / 2010

Transaction ID : SB30B.10206

Amount of Each Disbursement this Period

102.12

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

451.19

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 46 OF 117

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Richard Aragon

Mailing Address 109 Canton Point Rd

City Canton	State ME	Zip Code 04221
----------------	-------------	-------------------

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2010

Transaction ID : SB30B.9129

Amount of Each Disbursement this Period

826.55

Full Name (Last, First, Middle Initial)

B. Richard Aragon

Mailing Address 109 Canton Point Rd

City Canton	State ME	Zip Code 04221
----------------	-------------	-------------------

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2010

Transaction ID : SB30B.9842

Amount of Each Disbursement this Period

826.55

Full Name (Last, First, Middle Initial)

C. Richard Aragon

Mailing Address 109 Canton Point Rd

City Canton	State ME	Zip Code 04221
----------------	-------------	-------------------

Purpose of Disbursement
Reimb mileage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2010

Transaction ID : SB30B.9867

Amount of Each Disbursement this Period

285.12

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1938.22

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Richard Aragon

Mailing Address 109 Canton Point Rd

City Canton	State ME	Zip Code 04221
----------------	-------------	-------------------

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2010

Transaction ID : SB30B.10207

Amount of Each Disbursement this Period

826.55

Full Name (Last, First, Middle Initial)

B. Alexander Armstrong

Mailing Address 32 Lawson Road

City Cape Elizabeth	State ME	Zip Code 04107
------------------------	-------------	-------------------

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2010

Transaction ID : SB30B.9130

Amount of Each Disbursement this Period

445.17

Full Name (Last, First, Middle Initial)

C. Alexander Armstrong

Mailing Address 32 Lawson Road

City Cape Elizabeth	State ME	Zip Code 04107
------------------------	-------------	-------------------

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2010

Transaction ID : SB30B.9843

Amount of Each Disbursement this Period

445.17

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1716.89

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Alexander Armstrong

Mailing Address 32 Lawson Road

City	State	Zip Code
Cape Elizabeth	ME	04107

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2010

Transaction ID : SB30B.10208

Amount of Each Disbursement this Period

445.17

Full Name (Last, First, Middle Initial)

B. Philip Bailey

Mailing Address 86 Jellison Cove Road

City	State	Zip Code
Hancock	ME	04640

Purpose of Disbursement
Consultant fee

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2010

Transaction ID : SB30B.9160

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. Beth L Baker

Mailing Address 155 B Winthrop Center Rd

City	State	Zip Code
Winthrop	ME	04364

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2010

Transaction ID : SB30B.9844

Amount of Each Disbursement this Period

1078.10

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4523.27

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<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input checked="" type="checkbox"/>	30b

MAINE DEMOCRATIC STATE COMMITTEE

A. Beth L Baker

City	State	Zip Code
Winthrop	ME	04364

Transaction ID : SB30B.9985

Amount of Each Disbursement this Period

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

1000.00

Full Name (Last, First, Middle Initial)

Date of Disbursement

B. Lydia Blume

Three digital displays showing the date 11/15/2010 in MM/DD/YYYY format. The first display shows '11' with 'M' indicators above. The second shows '15' with 'D' indicators above. The third shows '2010' with 'Y' indicators above.

Mailing Address PO Box 1738

City	State	Zip Code
York Beach	ME	03910

Transaction ID : SB30B.9987

Purpose of Disbursement
GOTV Consulting Fee

Amount of Each Disbursement this Period

Candidate Name	
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	11
12	12
13	13
14	14
15	15
16	16
17	17
18	18
19	19
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21	21
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89	89
90	90
91	91
92	92
93	93
94	94
95	95
96	96
97	97
98	98
99	99
100	100

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

C. Broadcast Solutions, LLC

Three digital displays are shown, each with a different set of missing segments. The first display shows '11' with missing segments for the top horizontal bar of the first '1' and the top horizontal bar of the second '1'. The second display shows '01' with missing segments for the top horizontal bar of the '0' and the top horizontal bar of the '1'. The third display shows '2010' with missing segments for the top horizontal bar of the '2', the top horizontal bar of the '0', the top horizontal bar of the '1', and the top horizontal bar of the '0'.

Mailing Address 13806 Goosefoot Terr

City	State	Zip Code
Rockville	MD	20850

Transaction ID : SB30B.9947

Purpose of Disbursement
Robo calls

A diagram of a rectangular frame structure. The frame consists of four vertical members and four horizontal members. The joints are labeled as follows: 'a' at the top-left corner, 'b' at the top-right corner, 'c' at the bottom-right corner, and 'd' at the bottom-left corner. The frame is shown in a perspective view, with the front face slightly offset from the back face.

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

7503.08

State: District:

SUBTOTAL of Disbursements This Page (optional).....

9503.08

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Broadcast Solutions, LLC

Mailing Address 13806 Goosefoot Terr

City	State	Zip Code
Rockville	MD	20850

Purpose of Disbursement
Robo calls

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2010

Transaction ID : SB30B.9954

Amount of Each Disbursement this Period

273.10

Full Name (Last, First, Middle Initial)

B. Mary Erin Casale

Mailing Address 39 Water Street

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2010

Transaction ID : SB30B.9868

Amount of Each Disbursement this Period

1282.43

Full Name (Last, First, Middle Initial)

C. Mary Erin Casale

Mailing Address 39 Water Street

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Reimb Phone

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2010

Transaction ID : SB30B.9953

Amount of Each Disbursement this Period

110.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1665.53

--

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB30B

Transaction ID : SB30B.9953

11/4/2010 AT&T Mobility PO Box 536216 Atlanta GA 30353 Reimb Phone 110.00.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Peter Chandler

Mailing Address 99 Silver Street

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Reimb Staging expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2010

Transaction ID : SB30B.9542

Amount of Each Disbursement this Period

299.23

Full Name (Last, First, Middle Initial)

B. Peter Chandler

Mailing Address 99 Silver Street

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
GOTV Consultant fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2010

Transaction ID : SB30B.9964

Amount of Each Disbursement this Period

7000.00

Full Name (Last, First, Middle Initial)

C. Jan Clark

Mailing Address 487 Memorial Dr

City	State	Zip Code
Winthrop	ME	04364

Purpose of Disbursement
GOTV Consultant fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2010

Transaction ID : SB30B.9158

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9299.23

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB30B

Transaction ID : SB30B.9542

10/24/2010 Home Depot 300 Clarks Pond Parkway South Portland ME 04106 Reimb Staging supplies for 299.23.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Emily Fuller

Mailing Address 142 Pierce St Apt 1

City	State	Zip Code
Lewiston	ME	04210

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2010

Transaction ID : SB30B.9131

Amount of Each Disbursement this Period

772.93

Full Name (Last, First, Middle Initial)

B. Emily Fuller

Mailing Address 142 Pierce St Apt 1

City	State	Zip Code
Lewiston	ME	04210

Purpose of Disbursement
Reimb mileage & Office Supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2010

Transaction ID : SB30B.9486

Amount of Each Disbursement this Period

151.23

Full Name (Last, First, Middle Initial)

C. Emily Fuller

Mailing Address 142 Pierce St Apt 1

City	State	Zip Code
Lewiston	ME	04210

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2010

Transaction ID : SB30B.9845

Amount of Each Disbursement this Period

772.93

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1697.09

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: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: **SB30B**

Transaction ID : **SB30B.9486**

10/7/2010 Reimb mileage 61.60. 10/11/2010 Reimb mileage 34.32. 10/12/2010 Reimb mileage 34.32. 10/9/2010
Staple's 855 Lisbon Street Lewiston ME 04240 Reimb Flip chart 20.99.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Emily Fuller

Mailing Address 142 Pierce St Apt 1

City	State	Zip Code
Lewiston	ME	04210

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2010

Transaction ID : SB30B.10209

Amount of Each Disbursement this Period

772.93

Full Name (Last, First, Middle Initial)

B. Great Works Internet

Mailing Address 8 Pomerleau St

City	State	Zip Code
Biddeford	ME	04005

Purpose of Disbursement
Internet

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2010

Transaction ID : SB30B.9562

Amount of Each Disbursement this Period

160.00

Full Name (Last, First, Middle Initial)

C. Harvard Pilgrim Healthcare

Mailing Address 93 Worcester St

City	State	Zip Code
Wellesley	MA	02481

Purpose of Disbursement
Health Benefits

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2010

Transaction ID : SB30B.9537

Amount of Each Disbursement this Period

397.12

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1330.05

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Harvard Pilgrim Healthcare

Mailing Address 93 Worcester St

City	State	Zip Code
Wellesley	MA	02481

Purpose of Disbursement
Health Benefits

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2010

Transaction ID : SB30B.9538

Amount of Each Disbursement this Period

5639.10

Full Name (Last, First, Middle Initial)

B. Jonathan Hillier

Mailing Address 8 Bowden Street #2

City	State	Zip Code
Winslow	ME	04901

Purpose of Disbursement
GOTV Consultant fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2010

Transaction ID : SB30B.9157

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Zachary Kendrick

Mailing Address 175 State Street Apt 14

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2010

Transaction ID : SB30B.9846

Amount of Each Disbursement this Period

1126.34

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7265.44

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Zachary Kendrick

Mailing Address 175 State Street Apt 14

City Portland	State ME	Zip Code 04101
------------------	-------------	-------------------

Purpose of Disbursement
Reimb phones

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2010

Transaction ID : SB30B.9963

Amount of Each Disbursement this Period

141.50

Full Name (Last, First, Middle Initial)

B. Zachary Kendrick

Mailing Address 175 State Street Apt 14

City Portland	State ME	Zip Code 04101
------------------	-------------	-------------------

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2010

Transaction ID : SB30B.10210

Amount of Each Disbursement this Period

1126.34

Full Name (Last, First, Middle Initial)

C. Zachary Kendrick

Mailing Address 175 State Street Apt 14

City Portland	State ME	Zip Code 04101
------------------	-------------	-------------------

Purpose of Disbursement
Reimb-Mileage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2010

Transaction ID : SB30B.10001

Amount of Each Disbursement this Period

107.59

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1375.43

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: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: **SB30B**

Transaction ID : **SB30B.9963**

11/1/2010 AT&T Marginal Way 211 Marginal Way Portland ME 04101 Reimb phones 31.50. 10/28/2010 AT&T
Mobility PO Box 536216 Atlanta GA 30353 Reimb Cell phone 110.00.

Form/Schedule: **SB30B**

Transaction ID: **SB30B.10001**

11/15/2010-Reimburse Mileage 107.59.

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Jeremy Kennedy

Mailing Address 335 Forest Avenue Apt 215

City Portland	State ME	Zip Code 04101
------------------	-------------	-------------------

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2010

Transaction ID : SB30B.9136

Amount of Each Disbursement this Period

1450.66

Full Name (Last, First, Middle Initial)

B. Jeremy Kennedy

Mailing Address 335 Forest Avenue Apt 215

City Portland	State ME	Zip Code 04101
------------------	-------------	-------------------

Purpose of Disbursement
Reimb mileage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2010

Transaction ID : SB30B.9488

Amount of Each Disbursement this Period

241.00

Full Name (Last, First, Middle Initial)

C. Jeremy Kennedy

Mailing Address 335 Forest Avenue Apt 215

City Portland	State ME	Zip Code 04101
------------------	-------------	-------------------

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2010

Transaction ID : SB30B.9847

Amount of Each Disbursement this Period

1450.66

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3142.32

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Jeremy Kennedy

Mailing Address 335 Forest Avenue Apt 215

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Reimb mileage & phone

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2010

Transaction ID : SB30B.9962

Amount of Each Disbursement this Period

545.16

Full Name (Last, First, Middle Initial)

B. Jeremy Kennedy

Mailing Address 335 Forest Avenue Apt 215

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2010

Transaction ID : SB30B.10211

Amount of Each Disbursement this Period

1450.66

Full Name (Last, First, Middle Initial)

C. Maine Real Estate Management

Mailing Address PO Box 1193

City	State	Zip Code
Bangor	ME	04401

Purpose of Disbursement
Rent

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2010

Transaction ID : SB30B.9550

Amount of Each Disbursement this Period

450.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2445.82

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: **SB30B**

Transaction ID : **SB30B.9962**

10/23/2010 Reimb mileage 120.56. 10/26/2010 Reimb mileage 120.56. 10/30/2010 Reimb mileage 97.68. 10/31/2010
Reimb mileage 96.36. 10/30/2010 AT&T Mobility PO Box 6463 Carol Stream IL 60197 Reimb cell phone 110.00.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Marc Malon

Mailing Address 567 Pool St

City	State	Zip Code
Biddeford	ME	04005

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2010

Transaction ID : SB30B.9137

Amount of Each Disbursement this Period

1069.02

Full Name (Last, First, Middle Initial)

B. Marc Malon

Mailing Address 567 Pool St

City	State	Zip Code
Biddeford	ME	04005

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2010

Transaction ID : SB30B.9848

Amount of Each Disbursement this Period

1069.03

Full Name (Last, First, Middle Initial)

C. Marc Malon

Mailing Address 567 Pool St

City	State	Zip Code
Biddeford	ME	04005

Purpose of Disbursement
Consulting Fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2010

Transaction ID : SB30B.9984

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3638.05

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Marc Malon

Mailing Address 567 Pool St

City	State	Zip Code
Biddeford	ME	04005

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2010

Transaction ID : SB30B.10212

Amount of Each Disbursement this Period

1069.02

Full Name (Last, First, Middle Initial)

B. Marc Malon

Mailing Address 567 Pool St

City	State	Zip Code
Biddeford	ME	04005

Purpose of Disbursement
Mileage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2010

Transaction ID : SB30B.9995

Amount of Each Disbursement this Period

124.00

Full Name (Last, First, Middle Initial)

C. Arden Manning

Mailing Address 122 Boothby Ave

City	State	Zip Code
South Portland	ME	04106

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2010

Transaction ID : SB30B.9139

Amount of Each Disbursement this Period

2194.82

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3387.84

: 97 `A=G79 @C5 B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB30B
Transaction ID : SB30B.9995

11/10/10-Reimburse Mileage 124.00

Form/Schedule:
Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Arden Manning

Mailing Address 122 Boothby Ave

City	State	Zip Code
South Portland	ME	04106

Purpose of Disbursement
Reimb expenses

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2010

Transaction ID : SB30B.9227

Amount of Each Disbursement this Period

145.03

Full Name (Last, First, Middle Initial)

B. Arden Manning

Mailing Address 122 Boothby Ave

City	State	Zip Code
South Portland	ME	04106

Purpose of Disbursement
Reimb expenses

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2010

Transaction ID : SB30B.9534

Amount of Each Disbursement this Period

1135.51

Full Name (Last, First, Middle Initial)

C. Arden Manning

Mailing Address 122 Boothby Ave

City	State	Zip Code
South Portland	ME	04106

Purpose of Disbursement
Reimb office and GOTV expenses

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2010

Transaction ID : SB30B.9841

Amount of Each Disbursement this Period

4181.50

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5462.04

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: **SB30B**

Transaction ID : **SB30B.9227**

10/17/2010 Reimb Mileage 49.28. 10/13/2010 Hannaford Super Market 415 Philbrook Ave South Portland ME 04106
Reimb beverages 7.68. 10/13/2010 UNO Chicago Grill 364 Main Mall Road South Portland ME 04106 Reimb Lunch
59.88. 10/13/2010 Lock,Stock & Barrel PO Box 939 Portland ME 04104 Reimb Keys 9.45. 10/15/2010 Portland Main
Post Office 110 Marginal Way Portland ME 04101 Reimb Postage 18.74.

Form/Schedule: **SB30B**

Transaction ID: **SB30B.9534**

10/21/2010 Reimb mileage 48.64. 10/21/2010 CallFire 1335 4th St Suite 201 Sanamonica CA 90401 Reimb
Predictive Dialer 500.00. 10/20/2010 Rite Aid 290 Congress St Portland ME 04101 Reimb Office supplies 9.42.
10/20/2010 Portland Main Post Office Portland ME 04101 Reimb Postage 6.45. 10/21/2010 Maine Turnpike Authority
2360 Congress St Portland ME 04102 Reimb Tolls 2.00. 10/18/2010 Pine Tree Paper 633 Warren Ave Portland ME
04103 Reimb paper 114.00. 10/20/2010 One Stop Party Shop 262 Main St South Portland ME 04106 Reimb Rental
for chairs 455.00.

: 97 `A`G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @`CF`+H9A`N5H`CB
.

Form/Schedule: **SB30B**

Transaction ID : **SB30B.9841**

10/23/2010 AT&T 211 Marginal Way Portland ME 04101 Reimb phones 1312.50. 10/23/2010 Portland Main Post Office Portland ME 04101 Reimb Postage 7.69. 10/25/2010 Portland Downtown Station Portland ME 04101 Reimb Postage 140.69. 10/25/2010 The Home Depot 300 Clarks Pond Parkway South Portland ME 04106 Reimb Power strip 31.32.10/26/2010 Portland Downtown Station Portland ME 04101 Reimb postage 13.43. 10/25/2010 Verizon Wireless 365 Gorham Rd South Portland ME 04106 Reimb Phones 909.37. 10/25/2010 Handyman Rental 248 Main Street South Portland ME 04106 Reimb Heater rental 60.50. 10/26/2010 Callfire.com 1335 Forth St Suite 200 Santamonica CA 90401 Reimb Predictive Dialer 1400.00. 10/25/2010 Blow Brothers 1 Valley Lane Old Orchard Beach ME 04064 Reimb Porta Potty 306.00.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Arden Manning

Mailing Address 122 Boothby Ave

City	State	Zip Code
South Portland	ME	04106

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2010

Transaction ID : SB30B.9849

Amount of Each Disbursement this Period

2194.83

Full Name (Last, First, Middle Initial)

B. Arden Manning

Mailing Address 122 Boothby Ave

City	State	Zip Code
South Portland	ME	04106

Purpose of Disbursement
Reimb office supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2010

Transaction ID : SB30B.9864

Amount of Each Disbursement this Period

81.79

Full Name (Last, First, Middle Initial)

C. Arden Manning

Mailing Address 122 Boothby Ave

City	State	Zip Code
South Portland	ME	04106

Purpose of Disbursement
Reimbursement Expenses

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2010

Transaction ID : SB30B.9982

Amount of Each Disbursement this Period

473.28

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2749.90

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: 97 'A -G79 @ @ B9CI G'H9LH'F9 @ H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' -H9A -N5 HCB
.

Form/Schedule: **SB30B**

Transaction ID : **SB30B.9864**

10/20/2010 Hannaford 295 Forest Ave Portland ME 04101 Reimb Office supplies 81.79.

Form/Schedule: **SB30B**

Transaction ID: **SB30B.9982**

11/12/10-AT&T Wireless, PO Box 536216, Atlanta, GA 30353-6216 171.90. 11/9/10-UHAUL Moving and Storage,
411 Marginal Way, Portland, ME 04101 174.38. 11/10/10-UHAUL Moving and Storage, 411 Marginal Way, Portland,
ME 04101 127.00.

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 71 OF 117

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Mission Control Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2010

Mailing Address 114 A Mansfield Hollow Rd

City	State	Zip Code
Mansfield	CT	06250

Transaction ID : SB30B.9226Purpose of Disbursement
Mailing

Amount of Each Disbursement this Period

Candidate Name

CHELLIE M PINGREECategory/
Type

26882.76

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: ME District: 01

Full Name (Last, First, Middle Initial)

B. Mission Control Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2010

Mailing Address 114 A Mansfield Hollow Rd

City	State	Zip Code
Mansfield	CT	06250

Transaction ID : SB30B.9493Purpose of Disbursement
Mailing

Amount of Each Disbursement this Period

Candidate Name

CHELLIE M PINGREECategory/
Type

25000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: ME District: 01

Full Name (Last, First, Middle Initial)

C. NGP Software, Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2010

Mailing Address 1225 Eye Street, NW Suite 1225

City	State	Zip Code
Washington	DC	20005

Transaction ID : SB30B.9997Purpose of Disbursement
NGP Quarterly Billing

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

750.00

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

52632.76

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Northeast Delta Dental

Mailing Address PO Box 9566

City	State	Zip Code
Manchester	NH	03108

Purpose of Disbursement
Dental Benefits

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2010

Transaction ID : SB30B.9557

Amount of Each Disbursement this Period

628.43

Full Name (Last, First, Middle Initial)

B. Northeast Delta Dental

Mailing Address PO Box 9566

City	State	Zip Code
Manchester	NH	03108

Purpose of Disbursement
Dental Benefits

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2010

Transaction ID : SB30B.9558

Amount of Each Disbursement this Period

45.14

Full Name (Last, First, Middle Initial)

C. Rick Redmond

Mailing Address 171 Congress St Apt 3

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Reimburse mileage, phone, & event supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2010

Transaction ID : SB30B.9487

Amount of Each Disbursement this Period

217.40

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

890.97

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: **SB30B**

Transaction ID : **SB30B.9487**

10/17/2010 Reimb mileage 49.55. 10/18/2010 Reimb mileage 51.78. 10/21/2010 T Mobile PO Box 742596 Cincinnati
OH 45274 Reimb phone 100.33. 10/17/2010 Hannaford 295 Forest Ave Portland ME 04101 Reimb flowers 15.74.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Rick Redmond

Mailing Address 171 Congress St Apt 3

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2010

Transaction ID : SB30B.9850

Amount of Each Disbursement this Period

1451.54

Full Name (Last, First, Middle Initial)

B. Rick Redmond

Mailing Address 171 Congress St Apt 3

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Reimb mileage and office supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2010

Transaction ID : SB30B.9865

Amount of Each Disbursement this Period

205.42

Full Name (Last, First, Middle Initial)

C. Rick Redmond

Mailing Address 171 Congress St Apt 3

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Reimb mileage & tolls

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2010

Transaction ID : SB30B.9961

Amount of Each Disbursement this Period

37.50

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1694.46

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: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
 .

Form/Schedule: **SB30B**

Transaction ID : **SB30B.9865**

10/27/2010 Reimb mileage 62.93. 10/27/2010 Maine Turnpike Authority 2360 Congress st Portland ME 04102 Reimb
 Tolls 4.50. 10/27/2010 Amato's Italian Sandwiches 71 India Street Portland ME 04104 Reimb Food for volunteers
 3.93. 10/27/2010 Micucci Wholesale Groceries 45 India St Portland ME 04104 Reimb food for volunteers 6.17.
 10/27/2010 Anthony's Italian Kitchen 151 Middle St Portland ME 04101 Reimb food for volunteers 116.89. 10/27/2010
 Coffee By Design 67 India St Portland ME 04101 Reinb Coffee 11.00.

Form/Schedule: **SB30B**

Transaction ID: **SB30B.9961**

10/31/2010 Reimb mileage 34.50. 10/31/2010 Maine Turnpike Authority 2360 Congress St Portland ME 04102 Reimb
 tolls 3.00.

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Rick Redmond

Mailing Address 171 Congress St Apt 3

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Reimb-Cell Phone and Mileage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2010

Transaction ID : SB30B.10000

Amount of Each Disbursement this Period

194.82

Full Name (Last, First, Middle Initial)

B. Rick Redmond

Mailing Address 171 Congress St Apt 3

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Fundraising Consultant Fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2010

Transaction ID : SB30B.10002

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

C. Residence Inn Marriott

Mailing Address 145 Fore Street

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Room rental

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2010

Transaction ID : SB30B.9545

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4194.82

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: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: **SB30B**

Transaction ID : **SB30B.10000**

11/16/2010-T-Mobile, PO Box 742596, Cincinnati, OH 45274-2596 98.38. 11/09/10-Reimburse Mileage 50.10.
11/10/10-Reimburse Mileage 2.50. 11/11/10-Reimburse Mileage 43.84.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Raymond Rosendahl

Mailing Address 30 Preble Street

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2010

Transaction ID : SB30B.9851

Amount of Each Disbursement this Period

969.11

Full Name (Last, First, Middle Initial)

B. Kathryn Simmons

Mailing Address 285 Mountain St

City	State	Zip Code
Camden	ME	04843

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2010

Transaction ID : SB30B.9143

Amount of Each Disbursement this Period

2087.18

Full Name (Last, First, Middle Initial)

C. Kathryn Simmons

Mailing Address 285 Mountain St

City	State	Zip Code
Camden	ME	04843

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2010

Transaction ID : SB30B.9852

Amount of Each Disbursement this Period

2087.18

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5143.47

	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

MAINE DEMOCRATIC STATE COMMITTEE

Three digital displays showing the date 11/15/2010 in MM/DD/YYYY format. The first display shows '11' with 'M' labels above. The second shows '15' with 'D' labels above. The third shows '2010' with 'Y' labels above.

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

4500.00

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

1079.83

The image shows three 3x3 grids, each representing a number using the letters M, D, and Y. The first grid shows the number 11, with 'M' in the top-left and top-right positions, and '11' in the center. The second grid shows the number 17, with 'D' in the top-left and top-right positions, and '17' in the center. The third grid shows the number 2010, with 'Y' in the top-left, top-middle, top-right, and middle-right positions, and '2010' in the center.

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

110.00

5689.83



: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB30B

Transaction ID : SB30B.9998

10/28/10-US Cellular, PO Box 371345, Pittsburg, PA 15250-7345 110.00.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 81 OF 117

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address PO Box 689020

City	State	Zip Code
Des Moines	IA	50368-9020

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2010

Transaction ID : SB30B.9988

Amount of Each Disbursement this Period

1461.09

Full Name (Last, First, Middle Initial)

B. Alexander Stevens

Mailing Address 25 Belmeade Rd

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2010

Transaction ID : SB30B.9144

Amount of Each Disbursement this Period

897.09

Full Name (Last, First, Middle Initial)

C. Alexander Stevens

Mailing Address 25 Belmeade Rd

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Reimb Phone & Benefits

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2010

Transaction ID : SB30B.9490

Amount of Each Disbursement this Period

360.74

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2718.92

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: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB30B

Transaction ID : SB30B.9490

10/21/2010 AT&T Mobility PO Box 536216 Atlanta GA 30353 Reimb Phone 55.00. 10/21/2010 Dirego Health Agency
PO Box 11020 Lewiston ME 04243 Reimb Health Benefits 305.74.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Alexander Stevens

Mailing Address 25 Belmeade Rd

City Portland	State ME	Zip Code 04101
------------------	-------------	-------------------

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2010

Transaction ID : SB30B.9853

Amount of Each Disbursement this Period

897.10

Full Name (Last, First, Middle Initial)

B. Alexander Stevens

Mailing Address 25 Belmeade Rd

City Portland	State ME	Zip Code 04101
------------------	-------------	-------------------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2010

Transaction ID : SB30B.10215

Amount of Each Disbursement this Period

897.09

Full Name (Last, First, Middle Initial)

C. TD Banknorth

Mailing Address 101 Western Avenue

City Augusta	State ME	Zip Code 04330
-----------------	-------------	-------------------

Purpose of Disbursement
Payroll taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2010

Transaction ID : SB30B.9153

Amount of Each Disbursement this Period

4272.09

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6066.28

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. TD Banknorth

Mailing Address 101 Western Avenue

City	State	Zip Code
Augusta	ME	04330

Purpose of Disbursement
Visa Gift cards

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2010

Transaction ID : SB30B.9260

Amount of Each Disbursement this Period

10800.00

Full Name (Last, First, Middle Initial)

B. TD Banknorth

Mailing Address 101 Western Avenue

City	State	Zip Code
Augusta	ME	04330

Purpose of Disbursement
Visa Gift cards

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2010

Transaction ID : SB30B.9532

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. TD Banknorth

Mailing Address 101 Western Avenue

City	State	Zip Code
Augusta	ME	04330

Purpose of Disbursement
Payroll taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2010

Transaction ID : SB30B.9858

Amount of Each Disbursement this Period

5713.47

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17113.47

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SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. TD Banknorth

Mailing Address 101 Western Avenue

City Augusta State ME Zip Code 04330

Purpose of Disbursement
Payroll taxes

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 29 / 2010

Transaction ID : SB30B.9861

Amount of Each Disbursement this Period

409.79

Full Name (Last, First, Middle Initial)

B. TD Banknorth

Mailing Address 101 Western Avenue

City Augusta State ME Zip Code 04330

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 15 / 2010

Transaction ID : SB30B.10203

Amount of Each Disbursement this Period

5102.87

Full Name (Last, First, Middle Initial)

C. Catherine A Tiller

Mailing Address 70 Chauncey Creek Rd

City Kittery Point State ME Zip Code 03905

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 15 / 2010

Transaction ID : SB30B.9145

Amount of Each Disbursement this Period

824.96

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6337.62

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Catherine A Tiller

Mailing Address 70 Chauncey Creek Rd

City	State	Zip Code
Kittery Point	ME	03905

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2010

Transaction ID : SB30B.9854

Amount of Each Disbursement this Period

824.96

Full Name (Last, First, Middle Initial)

B. Catherine A Tiller

Mailing Address 70 Chauncey Creek Rd

City	State	Zip Code
Kittery Point	ME	03905

Purpose of Disbursement
Reimb cell phone

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2010

Transaction ID : SB30B.9866

Amount of Each Disbursement this Period

110.00

Full Name (Last, First, Middle Initial)

C. Catherine A Tiller

Mailing Address 70 Chauncey Creek Rd

City	State	Zip Code
Kittery Point	ME	03905

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2010

Transaction ID : SB30B.10216

Amount of Each Disbursement this Period

824.97

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1759.93

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: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB30B

Transaction ID : SB30B.9866

10/21/2010 Verizon Wireless PO Box 4003 Acworth GA 30101 Reimb cell phone 110.00.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Time Warner Cable

Mailing Address PO Box 1034

City	State	Zip Code
Buffalo	NE	14240

Purpose of Disbursement
Phones

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2010

Transaction ID : SB30B.9958

Amount of Each Disbursement this Period

438.78

Full Name (Last, First, Middle Initial)

B. Treasurer, State of Maine

Mailing Address Capitol Street

City	State	Zip Code
Augusta	ME	04330

Purpose of Disbursement
Payroll taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2010

Transaction ID : SB30B.9154

Amount of Each Disbursement this Period

1268.88

Full Name (Last, First, Middle Initial)

C. Treasurer, State of Maine

Mailing Address Capitol Street

City	State	Zip Code
Augusta	ME	04330

Purpose of Disbursement
Payroll taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2010

Transaction ID : SB30B.9859

Amount of Each Disbursement this Period

1508.38

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3216.04

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Treasurer, State of Maine

Mailing Address Capitol Street

City	State	Zip Code
Augusta	ME	04330

Purpose of Disbursement
Payroll taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2010

Transaction ID : SB30B.9862

Amount of Each Disbursement this Period

83.00

Full Name (Last, First, Middle Initial)

B. Treasurer, State of Maine

Mailing Address Capitol Street

City	State	Zip Code
Augusta	ME	04330

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2010

Transaction ID : SB30B.10204

Amount of Each Disbursement this Period

1356.45

Full Name (Last, First, Middle Initial)

C. United States Postmaster

Mailing Address 40 Western Avenue

City	State	Zip Code
Augusta	ME	04330

Purpose of Disbursement
Postage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2010

Transaction ID : SB30B.9863

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1739.45

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. US Cellular

Mailing Address 495 Forest Ave

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Phones

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2010

Transaction ID : SB30B.9224

Amount of Each Disbursement this Period

25156.89

Full Name (Last, First, Middle Initial)

B. US Cellular

Mailing Address 495 Forest Ave

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Phones

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2010

Transaction ID : SB30B.9533

Amount of Each Disbursement this Period

8918.90

Full Name (Last, First, Middle Initial)

C. Christopher Wasileski

Mailing Address 39 Muscatawa Ln

City	State	Zip Code
Lyman	ME	04002

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2010

Transaction ID : SB30B.9146

Amount of Each Disbursement this Period

857.28

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

34933.07

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SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Christopher Wasileski

Mailing Address 39 Muscatawa Ln

City Lyman State ME Zip Code 04002

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 29 / 2010

Transaction ID : SB30B.9855

Amount of Each Disbursement this Period

857.27

Full Name (Last, First, Middle Initial)

B. Christopher Wasileski

Mailing Address 39 Muscatawa Ln

City Lyman State ME Zip Code 04002

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 15 / 2010

Transaction ID : SB30B.10217

Amount of Each Disbursement this Period

857.27

Full Name (Last, First, Middle Initial)

C. Kathleen Whitelaw

Mailing Address 37 S Curtisville Road

City Concord State NH Zip Code 03301

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 15 / 2010

Transaction ID : SB30B.9147

Amount of Each Disbursement this Period

969.12

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2683.66

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Kathleen Whitelaw

Mailing Address 37 S Curtisville Road

City	State	Zip Code
Concord	NH	03301

Purpose of Disbursement
Reimb phone & benefits

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2010

Transaction ID : SB30B.9489

Amount of Each Disbursement this Period

495.00

Full Name (Last, First, Middle Initial)

B. Kathleen Whitelaw

Mailing Address 37 S Curtisville Road

City	State	Zip Code
Concord	NH	03301

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2010

Transaction ID : SB30B.9856

Amount of Each Disbursement this Period

969.11

Full Name (Last, First, Middle Initial)

C. Kathleen Whitelaw

Mailing Address 37 S Curtisville Road

City	State	Zip Code
Concord	NH	03301

Purpose of Disbursement
Reimb phone & Benefits

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2010

Transaction ID : SB30B.9968

Amount of Each Disbursement this Period

495.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1959.11

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: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: **SB30B**

Transaction ID : **SB30B.9489**

10/11/2010 AT&T Mobility PO Box 536216 Atlanta GA 30353 Reimb Phone 110.00. 10/11/2010 Anthem Blue Cross
and Blue Shield PO Box 11002 Lewiston ME 04243 Reimb Health Benefits 385.00.

Form/Schedule: **SB30B**

Transaction ID: **SB30B.9968**

11/4/2010 AT&T Mobility 536216 Atlanta GA 30353 Reimb cell phone 110.00. 10/10/2010 Anthem 2 Gannett Drive
South Portland ME 04106 Reimb Benefits 385.00.

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Kathleen Whitelaw

Mailing Address 37 S Curtisville Road

City	State	Zip Code
Concord	NH	03301

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2010

Transaction ID : SB30B.10213

Amount of Each Disbursement this Period

969.12

Full Name (Last, First, Middle Initial)

B. Christopher Winstead

Mailing Address 19 Roger Street

City	State	Zip Code
Bangor	ME	04401

Purpose of Disbursement
Reimb mileage & parking

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2010

Transaction ID : SB30B.9049

Amount of Each Disbursement this Period

213.24

Full Name (Last, First, Middle Initial)

C. Christopher Winstead

Mailing Address 19 Roger Street

City	State	Zip Code
Bangor	ME	04401

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2010

Transaction ID : SB30B.9148

Amount of Each Disbursement this Period

1019.50

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2201.86

--

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB30B

Transaction ID : SB30B.9049

10/8/2010 Reimb mileage 156.24. 10/12/2010 City of Bangor Parking 100 Broad St Bangor ME 04401 Reimb parking 57.00.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 96 OF 117

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Christopher Winstead

Mailing Address 19 Roger Street

City	State	Zip Code
Bangor	ME	04401

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2010

Transaction ID : SB30B.9857

Amount of Each Disbursement this Period

1019.49

Full Name (Last, First, Middle Initial)

B. Christopher Winstead

Mailing Address 19 Roger Street

City	State	Zip Code
Bangor	ME	04401

Purpose of Disbursement
Reimb mileage, hotel & phone

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2010

Transaction ID : SB30B.9967

Amount of Each Disbursement this Period

613.95

Full Name (Last, First, Middle Initial)

C. Christopher Winstead

Mailing Address 19 Roger Street

City	State	Zip Code
Bangor	ME	04401

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2010

Transaction ID : SB30B.10218

Amount of Each Disbursement this Period

1019.51

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2652.95

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: **SB30B**

Transaction ID : **SB30B.9967**

10/22/2010 Reimb mileage 56.85. 10/25/2010 Reimb mileage 76.16. 10/26/2010 Reimb mileage 123.69. 10/29/2010
Reoimb mileage 58.30. 11/1/2010 Reimb mileage 51.48. 11/2/2010 Reimb mileage 51.48. 10/25/2010 Presque Isle
Inn 116 Main Street Presque Isle ME 04769 Reimb hotel room 85.99. 11/3/2010 AT&T Mobility PO Box 536216
Atlanta GA 30353 Reimb cell phone 110.00.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Christopher Winstead

Mailing Address 19 Roger Street

City Bangor State ME Zip Code 04401

Purpose of Disbursement
Reimb-Mileage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 17 / 2010

Transaction ID : SB30B.9999

Amount of Each Disbursement this Period

182.60

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

182.60

215402.66

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SB30B

Transaction ID : SB30B.9999

11/04/10-Reimburse Mileage 58.08. 11/05/10-Reimburse Mileage 58.08. 11/10/10-Reimburse Mileage 66.44.

Form/Schedule:

Transaction ID:

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 100 OF 117

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Beth L Baker		Transaction ID : H4.9133		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 155 B Winthrop Center Rd					
City Winthrop	State ME	Zip Code 04364			
Purpose of Disbursement: Payroll - Less than 25% on FEA				Allocated Activity or Event Year-To-Date 338680.54	
Activity or Event Identifier: Administrative		Category/ Type		Date 10 / 15 / 2010	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
161.71			916.38		1078.09

B. Full Name (Last, First, Middle Initial) Zachary Kendrick		Transaction ID : H4.9134		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 175 State Street Apt 14					
City Portland	State ME	Zip Code 04101			
Purpose of Disbursement: Payroll - Less than 25% on FEA				Allocated Activity or Event Year-To-Date 339806.88	
Activity or Event Identifier: Administrative		Category/ Type		Date 10 / 15 / 2010	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
168.95			957.39		1126.34

C. Full Name (Last, First, Middle Initial) Rick Redmond		Transaction ID : H4.9141		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 171 Congress St Apt 3					
City Portland	State ME	Zip Code 04101			
Purpose of Disbursement: Payroll - Less than 25% on FEA				Allocated Activity or Event Year-To-Date 341258.41	
Activity or Event Identifier: Administrative		Category/ Type		Date 10 / 15 / 2010	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.73			1233.80		1451.53

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
548.39		3107.57		3655.96

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 101 OF 117

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Raymond Rosendahl		Transaction ID : H4.9142		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 30 Preble Street					
City Portland	State ME	Zip Code 04101			
Purpose of Disbursement: Payroll - Less than 25% on FEA				Allocated Activity or Event Year-To-Date 34227.53	
Activity or Event Identifier: Administrative		Category/ Type		Date 10 / 15 / 2010	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
145.37			823.75		969.12

B. Full Name (Last, First, Middle Initial) Mary Erin Casale		Transaction ID : H4.9150		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 39 Water Street					
City Portland	State ME	Zip Code 04101			
Purpose of Disbursement: Payroll - Less than 25% on FEA				Allocated Activity or Event Year-To-Date 343509.96	
Activity or Event Identifier: Administrative		Category/ Type		Date 10 / 15 / 2010	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
192.36			1090.07		1282.43

C. Full Name (Last, First, Middle Initial) TD Banknorth		Transaction ID : H4.9151		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 101 Western Avenue					
City Augusta	State ME	Zip Code 04330			
Purpose of Disbursement: Payroll taxes - Less than 25% on FEA				Allocated Activity or Event Year-To-Date 345136.15	
Activity or Event Identifier: Administrative		Category/ Type		Date 10 / 15 / 2010	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
243.93			1382.26		1626.19

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
581.66		3296.08		3877.74

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 102 OF 117

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Treasurer, State of Maine		Transaction ID : H4.9152	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Capitol Street				
City Augusta	State ME	Zip Code 04330		
Purpose of Disbursement: Payroll taxes - Less than 25% on FEA			Allocated Activity or Event Year-To-Date 345455.15	
Activity or Event Identifier: Administrative		Category/ Type	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
47.85			271.15	319.00

B. Full Name (Last, First, Middle Initial) TD Banknorth		Transaction ID : H4.9155	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 101 Western Avenue				
City Augusta	State ME	Zip Code 04330		
Purpose of Disbursement: Payroll taxes - Less than 25% on FEA			Allocated Activity or Event Year-To-Date 345864.94	
Activity or Event Identifier: Administrative		Category/ Type	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
61.47			348.32	409.79

C. Full Name (Last, First, Middle Initial) Treasurer, State of Maine		Transaction ID : H4.9156	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Capitol Street				
City Augusta	State ME	Zip Code 04330		
Purpose of Disbursement: Payroll taxes - Less than 25% on FEA			Allocated Activity or Event Year-To-Date 345947.94	
Activity or Event Identifier: Administrative		Category/ Type	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
12.45			70.55	83.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
121.77		690.02		811.79

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 103 OF 117

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Pat Dumas		Transaction ID : H4.9535		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 10 Dumas Drive				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Augusta	State ME	Zip Code 04330		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Plumbing repair				Allocated Activity or Event Year-To-Date 346057.94	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.50			93.50		110.00

B. Full Name (Last, First, Middle Initial) Ram Harnden, Inc		Transaction ID : H4.9540		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 9 Avon Street				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Cape Elizabeth	State ME	Zip Code 04107		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Rent				Allocated Activity or Event Year-To-Date 347057.94	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
150.00			850.00		1000.00

C. Full Name (Last, First, Middle Initial) MacDonald Page & Co		Transaction ID : H4.9566		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 30 Long Creek Drive				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City S Portland	State ME	Zip Code 04106		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Consulting fee				Allocated Activity or Event Year-To-Date 348957.94	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
285.00			1615.00		1900.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
451.50		2558.50		3010.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Dolphin Capitol Corp		Transaction ID : H4.9548		Allocated Activity or Event:	
Mailing Address PO Box 644006				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Cincinnati	State OH	Zip Code 45264		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Copier rental				349116.72	
Activity or Event Identifier: Administrative		Category/ Type		Date	
				M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2010	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.82			134.96		158.78

B. Full Name (Last, First, Middle Initial) Leighton Cooney		Transaction ID : H4.9552		Allocated Activity or Event:	
Mailing Address 11 Pine St				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Lewiston	State ME	Zip Code 04240		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Rent				349304.22	
Activity or Event Identifier: Administrative		Category/ Type		Date	
				M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2010	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.13			159.37		187.50

C. Full Name (Last, First, Middle Initial) Capitol Computers		Transaction ID : H4.9554		Allocated Activity or Event:	
Mailing Address 151 Water Street				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Augusta	State ME	Zip Code 04330		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Consultant fee				349354.22	
Activity or Event Identifier: Administrative		Category/ Type		Date	
				M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2010	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.50			42.50		50.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.45		336.83		396.28

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Beth L Baker			Transaction ID : H4.9560			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 155 B Winthrop Center Rd								
City Winthrop		State ME		Zip Code 04364				
Purpose of Disbursement: Postage				Category/ Type		Allocated Activity or Event Year-To-Date 349363.02		
Activity or Event Identifier: Administrative						Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="1.32"/>				<input type="text" value="7.48"/>				<input type="text" value="8.80"/>

B. Full Name (Last, First, Middle Initial) W B Mason			Transaction ID : H4.9564			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 111								
City Brockton		State MA		Zip Code 02303				
Purpose of Disbursement: Office Supplies				Category/ Type		Allocated Activity or Event Year-To-Date 349470.29		
Activity or Event Identifier: Administrative						Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="16.09"/>				<input type="text" value="91.18"/>				<input type="text" value="107.27"/>

C. Full Name (Last, First, Middle Initial) North Dam LLC			Transaction ID : H4.9565			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2 Main Street Suite #17-301E								
City Biddeford		State ME		Zip Code 04005				
Purpose of Disbursement: Rent				Category/ Type		Allocated Activity or Event Year-To-Date 350020.29		
Activity or Event Identifier: Administrative						Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="82.50"/>				<input type="text" value="467.50"/>				<input type="text" value="550.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="99.91"/>		<input type="text" value="566.16"/>		<input type="text" value="666.07"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: H4

Transaction ID : H4.9560

10/14/2010 Augusta Main Post Office 40 Western Ave Augusta ME 04330 Reimb postage 8.80.

Form/Schedule:

Transaction ID:

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 107 OF 117

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) J&S Oil		Transaction ID : H4.9950		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 8					
City Manchester	State ME	Zip Code 04351			
Purpose of Disbursement: Fuel Oil				Allocated Activity or Event Year-To-Date 350489.68	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 05 / 2010	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
70.41			398.98		469.39

B. Full Name (Last, First, Middle Initial) McCormick & Sons Trucking		Transaction ID : H4.9956		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 281 Saco Rd					
City Hollis	State ME	Zip Code 04042			
Purpose of Disbursement: Trash removal				Allocated Activity or Event Year-To-Date 350529.68	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 05 / 2010	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
6.00			34.00		40.00

C. Full Name (Last, First, Middle Initial) Riverside Disposal		Transaction ID : H4.9969		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 700 River Rd					
City Chelsea	State ME	Zip Code 04330			
Purpose of Disbursement: Trash removal				Allocated Activity or Event Year-To-Date 350559.68	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 12 / 2010	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
4.50			25.50		30.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
80.91		458.48		539.39

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 108 OF 117

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Central Maine Power Co		Transaction ID : H4.9970		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 1084					
City Augusta	State ME	Zip Code 04332			
Purpose of Disbursement: Utilities				Allocated Activity or Event Year-To-Date 350868.56	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 12 / 2010	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
46.33			262.55		308.88

B. Full Name (Last, First, Middle Initial) Central Maine Power Co		Transaction ID : H4.9971		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 1084					
City Augusta	State ME	Zip Code 04332			
Purpose of Disbursement: Utilities				Allocated Activity or Event Year-To-Date 351077.35	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 12 / 2010	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
31.32			177.47		208.79

C. Full Name (Last, First, Middle Initial) W B Mason		Transaction ID : H4.9976		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 111					
City Brockton	State MA	Zip Code 02303			
Purpose of Disbursement: Office Supplies				Allocated Activity or Event Year-To-Date 351227.91	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 12 / 2010	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
22.58			127.98		150.56

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.23		568.00		668.23

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 110 OF 117

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Beth L Baker		Transaction ID : H4.10219		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 155 B Winthrop Center Rd				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Winthrop	State ME	Zip Code 04364		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Payroll		Category/ Type		Allocated Activity or Event Year-To-Date 354279.38	
Activity or Event Identifier: Administrative				Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
161.71			916.38		1078.09

B. Full Name (Last, First, Middle Initial) Arden Manning		Transaction ID : H4.10220		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 122 Boothby Ave				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City South Portland	State ME	Zip Code 04106		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Payroll		Category/ Type		Allocated Activity or Event Year-To-Date 356474.19	
Activity or Event Identifier: Administrative				Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
329.22			1865.59		2194.81

C. Full Name (Last, First, Middle Initial) Rick Redmond		Transaction ID : H4.10221		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 171 Congress St Apt 3				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Portland	State ME	Zip Code 04101		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Payroll		Category/ Type		Allocated Activity or Event Year-To-Date 357925.74	
Activity or Event Identifier: Administrative				Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
217.73			1233.82		1451.55

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
708.66		4015.79		4724.45

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 111 OF 117

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Raymond Rosendahl		Transaction ID : H4.10222		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 30 Preble Street					
City Portland	State ME	Zip Code 04101			
Purpose of Disbursement: Payroll				Allocated Activity or Event Year-To-Date 358894.86	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
145.37			823.75		969.12

B. Full Name (Last, First, Middle Initial) Mary Erin Casale		Transaction ID : H4.9996		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 39 Water Street					
City Portland	State ME	Zip Code 04101			
Purpose of Disbursement: Postage-DSC				Allocated Activity or Event Year-To-Date 358941.06	
Activity or Event Identifier: Administrative		Category/ Type 001		Date <input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.93			39.27		46.20

C. Full Name (Last, First, Middle Initial) W Jo Moser Photography		Transaction ID : H4.9543		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1159 Broadway					
City South Portland	State ME	Zip Code 04106			
Purpose of Disbursement: Photo shoot & Disc				Allocated Activity or Event Year-To-Date 4096.66	
Activity or Event Identifier: Victory 2010 Clinton Event(09/26/2010)		Category/ Type		Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.00			25.00		50.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.30		888.02		1065.32

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
3225.79		18162.82		21388.61

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: H4
Transaction ID : H4.9996

11/15/2010-Reimburse Postage 46.20.

Form/Schedule:
Transaction ID:

SCHEDULE H5 (FEC Form 3X)**TRANSFERS OF LEVIN FUNDS RECEIVED FOR
ALLOCATED FEDERAL ELECTION ACTIVITY****(To be used by State, District and Local Party Committees Only)**PAGE 113 OF 117
FOR LINE 18b OF FORM 3XNAME OF COMMITTEE (In Full)
MAINE DEMOCRATIC STATE COMMITTEENAME OF ACCOUNT
Levin Account

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y
10 / 18 / 2010

TOTAL AMOUNT TRANSFERRED

17165.75

BREAKDOWN OF THIS TRANSFER

Transaction ID : H5.9163

i) **Voter Registration**

VOTER REGISTRATION

Total Amount Transferred for Voter Registration.....

0.00

ii) **Voter ID**

VOTER ID

Total Amount Transferred for Voter ID

0.00

iii) **GOTV**

GOTV

Total Amount Transferred for GOTV

17165.75

iv) **Generic Campaign Activity**

GENERIC CAMPAIGN ACTIVITY

Total Amount Transferred for Generic Campaign Activity

0.00

NAME OF ACCOUNT

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y

TOTAL AMOUNT TRANSFERRED

BREAKDOWN OF THIS TRANSFER

i) **Voter Registration**

VOTER REGISTRATION

Total Amount Transferred for Voter Registration.....

ii) **Voter ID**

VOTER ID

Total Amount Transferred for Voter ID

iii) **GOTV**

GOTV

Total Amount Transferred for GOTV

iv) **Generic Campaign Activity**

GENERIC CAMPAIGN ACTIVITY

Total Amount Transferred for Generic Campaign Activity

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)

TOTAL This Period (Voter Registration).....

0.00

TOTAL This Period (Voter ID)

0.00

TOTAL This Period (GOTV).....

17165.75

TOTAL This Period (Generic Campaign Activity).....

0.00

TOTAL This Period (Total Amount of Transfers Received).....

17165.75

SCHEDULE H6 (FEC Form 3X)
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS
FOR ALLOCATED FEDERAL ELECTION ACTIVITY
(To be used by State, District and Local Party Committees Only)

PAGE 114 OF 117
FOR LINE 30a OF FORM 3X

NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) / Full Organization Name

Mission Control Inc

Type of Allocated Activity or Event:

☐ Voter Registration☐ Voter ID☐ GOTV☒ Generic Campaign

Transaction ID : H6.9161

Mailing Address 114 A Mansfield Hollow Rd

Allocated Activity or Event Year-To-Date

80307.56

City	State	Zip Code
Mansfield	CT	06250

Purpose of Disbursement
Mailing

Category/ Type

Date

M M / D D / Y Y Y Y Y Y
10 / 18 / 2010

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

3029.25

17165.75

20195.00

B. Full Name (Last, First, Middle Initial) / Full Organization Name

Type of Allocated Activity or Event:

☐ Voter Registration☐ Voter ID☐ GOTV☐ Generic Campaign

Mailing Address

Allocated Activity or Event Year-To-Date

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/ Type

Date

M M / D D / Y Y Y Y Y Y

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial) / Full Organization Name

Type of Allocated Activity or Event:

☐ Voter Registration☐ Voter ID☐ GOTV☐ Generic Campaign

Mailing Address

Allocated Activity or Event Year-To-Date

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/ Type

Date

M M / D D / Y Y Y Y Y Y

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

SUBTOTAL of Shared Federal and Levin Activity This Page

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

3029.25

17165.75

20195.00

TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

FEDERAL SHARE

3029.25

LEVIN SHARE

17165.75

TOTAL AMOUNT

20195.00

TOTAL This Period for the Levin Share

SCHEDULE L (FEC Form 3X)**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID : SL.9202

NAME OF COMMITTEE (In Full)		
MAINE DEMOCRATIC STATE COMMITTEE		
NAME OF ACCOUNT		
Levin Account		
	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
(a) Itemized (Use Schedule L-A)	0.00	81500.00
(b) Unitemized	0.00	0.00
(c) Total	0.00	81500.00
2. OTHER RECEIPTS	0.00	0.00
3. TOTAL RECEIPTS (Add Lines 1c and 2)	0.00	81500.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
(a) Voter Registration	0.00	0.00
(b) Voter ID	0.00	0.00
(c) GOTV	17165.75	85427.17
(d) Generic Campaign	0.00	0.00
(e) Total	17165.75	85427.17
5. OTHER DISBURSEMENTS	13000.00	13000.00
6. TOTAL DISBURSEMENTS (Add Lines 4e and 5)	30165.75	98427.17
7. BEGINNING CASH ON HAND (for Column B, use cash as of January 1st)	30551.86	147.53
8. RECEIPTS (from Line 3)	0.00	81500.00
9. SUBTOTAL (Add Lines 7 and 8)	30551.86	81647.53
10. DISBURSEMENTS (From Line 6)	30165.75	98427.17
11. ENDING CASH ON HAND (Subtract Line 10 From Line 9)	386.11	-16779.64

SCHEDULE L-B (FEC Form 3X)
ITEMIZED DISBURSEMENTS
OF LEVIN FUNDS

Use separate schedule(s)
for each category of the
Aggregation Page

FOR LINE NUMBER: PAGE 116 OF 117

(check only one)

☐ 4a
☐ 4b

☒ 4c
☐ 4d

5

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) / Full Organization Name

A. Maine Democratic Party- Federal Account

Mailing Address 16 Winthrop Street

City State Zip Code
 Augusta ME 04330

Purpose of Disbursement
 Allocation Transfer

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 10 18 2010

Transaction ID : SBSL4C.10202

Amount of Each Disbursement this Period

17165.75

Account : 4103

Full Name (Last, First, Middle Initial) / Full Organization Name

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Account :

Full Name (Last, First, Middle Initial) / Full Organization Name

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Account :

Full Name (Last, First, Middle Initial) / Full Organization Name

D.

Mailing Address

City State Zip Code

Purpose of Disbursement

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Account :

Full Name (Last, First, Middle Initial) / Full Organization Name

E.

Mailing Address

City State Zip Code

Purpose of Disbursement

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Account :

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

17165.75

17165.75

SCHEDULE L-B (FEC Form 3X)
ITEMIZED DISBURSEMENTS
OF LEVIN FUNDS

Use separate schedule(s)
for each category of the
Aggregation Page

FOR LINE NUMBER: PAGE 117 OF 117

(check only one)

☐ 4a
☐ 4b

☐ 4c
☐ 4d

☒ 5

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NAME OF COMMITTEE (In Full)

MAINE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) / Full Organization Name

A. Non Federal Bank Account

Mailing Address 16 Winthrop Street

City State Zip Code
 Augusta ME 04330
 Purpose of Disbursement
 Transfer

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 10 22 2010

Transaction ID : SBSL5.9265

Amount of Each Disbursement this Period

13000.00

Account : 4103

Full Name (Last, First, Middle Initial) / Full Organization Name

B.

Mailing Address

City State Zip Code
 Purpose of Disbursement

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Account :

Full Name (Last, First, Middle Initial) / Full Organization Name

C.

Mailing Address

City State Zip Code
 Purpose of Disbursement

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Account :

Full Name (Last, First, Middle Initial) / Full Organization Name

D.

Mailing Address

City State Zip Code
 Purpose of Disbursement

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Account :

Full Name (Last, First, Middle Initial) / Full Organization Name

E.

Mailing Address

City State Zip Code
 Purpose of Disbursement

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Account :

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

13000.00

13000.00